**U.S. Department of Justice**
United States Marshals Service

**PROCESS RECEIPT AND RETURN**
See *"Instructions for Service of Process by U S Marshal"*

| PLAINTIFF Matthew Kurtenbech | COURT CASE NUMBER 1:21-CV-01006-CBK |
|---|---|
| DEFENDANT Securus Technologies | TYPE OF PROCESS Summons + Complaint |

NAME OF INDIVIDUAL, COMPANY, CORPORATION ETC TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN

**SERVE AT**
Securus Technologies C/O CT Corporation System
ADDRESS *(Street or RFD, Apartment No , City, State and ZIP Code)*
314 S. Coteau St., Pierre, SD 57501

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

Matthew Kurtenbach #262814
MCF Faribault
1101 Linden Lane
Faribault, MN 55021

| | |
|---|---|
| Number of process to be served with this Form 285 | 2 |
| Number of parties to be served in this case | 1 |
| Check for service on U S A | |

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE *(Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):*

Fold

CT Corporation System

Fold

*[stamp: 2021 MAY 21 PM 3:17 U.S. MARSHAL RECEIVED SIOUX FALLS, SD]*

| Signature of Attorney other Originator requesting service on behalf of | ☒ PLAINTIFF ☐ DEFENDANT | TELEPHONE NUMBER N/A | DATE 5-15-21 |
|---|---|---|---|

## SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

| I acknowledge receipt for the total number of process indicated *(Sign only for USM 285 if more than one USM 285 is submitted)* | Total Process 1 | District of Origin No 73 | District to Serve No 73 | Signature of Authorized USMS Deputy or Clerk | Date 5/21/21 |
|---|---|---|---|---|---|

I hereby certify and return that I ☐ have personally served , ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual , company, corporation, etc , at the address shown above on the on the individual , company, corporation, etc shown at the address inserted below

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc named above *(See remarks below)*

| Name and title of individual served *(if not shown above)* Deborah Raymond | ☐ A person of suitable age and discretion then residing in defendant's usual place of abode |
|---|---|

| Address *(complete only different than shown above)* | Date 5/27/2021 | Time 12:00 ☐ am ☒ pm |
|---|---|---|

Signature of U S Marshal or Deputy

| Service Fee 65ᵃ | Total Mileage Charges including *endeavors* 0.56 | Forwarding Fee — | Total Charges 65 56 | Advance Deposits · | Amount owed to U S Marshal or (Amount of Refund*) 65.56 |
|---|---|---|---|---|---|

REMARKS Served to Deborah Raymond, Intake Spec. @ CT Corp. System | Deputy Dour Irvill

| DISTRIBUTE TO: | 1 CLERK OF THE COURT<br>2 USMS RECORD<br>3 NOTICE OF SERVICE<br>4 BILLING STATEMENT* To be returned to the U S Marshal with payment, if any amount is owed. Please remit promptly payable to U S Marshal<br>5 ACKNOWLEDGMENT OF RECEIPT | PRIOR EDITIONS MAY BE USED<br><br>Form USM-285<br>Rev 11/13 |
|---|---|---|

AO 440 (Rev 06/12)  Summons in a Civil Action (Page 2)

Civil Action No.

## PROOF OF SERVICE
### *(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))*

This summons for *(name of individual and title, if any)* Securus Technologies

was received by me on *(date)* 5/26/2021 .

☐ I personally served the summons on the individual at *(place)* _____

_____ on *(date)* _____ ; or

☐ I left the summons at the individual's residence or usual place of abode with *(name)* _____

_____ , a person of suitable age and discretion who resides there,

on *(date)* _____ , and mailed a copy to the individual's last known address; or

☑ I served the summons on *(name of individual)* Deborah Raymond _____ , who is

designated by law to accept service of process on behalf of *(name of organization)* Securus Technologies

C/o CT Corp. System on *(date)* 5/27/2021 ; or

☐ I returned the summons unexecuted because _____ ; or

☐ Other *(specify)* ·

My fees are $ 65ᵃ for travel and $ 0.56 for services, for a total of $ 65.56  ~~0.00~~ .

I declare under penalty of perjury that this information is true.

Date: 6/1/2021

_____
Server's signature

Spencer O'Bryan DUSM
Printed name and title

225 S. Pierre St., Pierre, SD
_____
Server's address

Additional information regarding attempted service, etc: